

AUTO CR - LOG SUMMARY #1070561

TYPE: INFO

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
IT IS REPORTED THAT THE SUBJECT RESISTED ARREST AND THE INVOLVED MEMBER TASERED HIM.	(None Entered)		

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	STOPPA, KENNETH A	339		025 /	LIEUTENANT OF POLICE	M	WHI		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
24-JUL-2014 06:12 - 24-JUL-2014 06:12		2511	025	090 - APARTMENT	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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Other Involved Parties

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD	Victim/Subject					M	WWH		
CPD Employee	Involved Member	GOLDEN, KENNETH M	7324	025 /	POLICE OFFICER	M	WHI		

Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y

Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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Investigator History

Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	31-JUL-2014 12:57	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	31-JUL-2014 12:57	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	28-JUL-2014 07:35	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	26-JUL-2014 08:39	WEBB, MAIRA	INVESTIGATOR 2 COPA	113 /	
PRELIMINARY	26-JUL-2014 08:38	WEBB, MAIRA	INVESTIGATOR 2 COPA	113 /	
PRELIMINARY	24-JUL-2014 07:59	STEWART, DENISE	INTAKE AIDE	113 /	

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					STEWART, DENISE	24-JUL-2014 07:59			
	DOCUMENTS - INTAKE INCIDENT		5		N	WEBB, MAIRA	26-JUL-2014 08:36	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1	SERIAL#ZZX30068A	N	STEWART, DENISE	24-JUL-2014 08:10	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	OFC. K. GOLDEN#7324	N	STEWART, DENISE	24-JUL-2014 08:15	APPROVED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Accused Penalty History

Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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FACE SHEET (Notification Date: 24-JUL-2014) - LOG #1070561

TYPE: INFO

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	STOPPA, KENNETH A	339		025 /	LIEUTENANT OF POLICE	M	WHI		

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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	24-JUL-2014 19:59	STEWART, DENISE	

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	31-JUL-2014 12:57	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
CLOSED AT C.O.P.A.	31-JUL-2014 12:57	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
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PRELIMINARY	24-JUL-2014 07:59	STEWART, DENISE	INTAKE AIDE	113 /	

EVIDENCE SYNC^{OFFLINE}

DEVICE REPORT

ECD Information**Model #:** TASER_ECD_X2**Serial #:** ZZX30068A**Firmware Version:** FWBundle Rev. 03.045**Device Health:** Good**Offline Report****Date:**

24 Jul 2014 19:11:09

Local Timezone:

Central Standard Time (UTC -5:00)

Event Log

GMT Time	Local Time	Event	Cartridge Info	Duration	Temp	Batt%
07/24/2014 23:12:39	07/24/2014 18:12:39	Armed	C1: 25' Standard C2: 25' Standard		27°C 27°C	90% 90%
07/24/2014 23:12:45	07/24/2014 18:12:45	Arc	C1: 25' Standard C2: 25' Standard	3s 3s		90% 90%
07/24/2014 23:13:00	07/24/2014 18:13:00	Arc	C1: 25' Standard C2: 25' Standard	3s 3s		90% 90%
07/24/2014 23:14:02	07/24/2014 18:14:02	Safe	C1: 25' Standard C2: 25' Standard	1m 23s 1m 23s	32°C 32°C	90% 90%
07/25/2014 00:04:38	07/24/2014 19:04:38	USB Connected	C1: Invalid Cart. Type C2: Invalid Cart. Type		28°C 28°C	0% 0%
07/25/2014 00:09:34	07/24/2014 19:09:34	Time Sync	07/24/2014 19:09:34 to 07/24/2014 19:10:32			

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1. DATE OF INCIDENT 24-JUL-2014		TIME 18:12:00		2. ADDRESS OF OCCURRENCE [REDACTED]			3. LOCATION CODE 090		4. BEAT/OCCUR 2511																																																																																																																			
	5. POSITION 9161		6. LAST NAME GOLDEN		7. FIRST NAME KENNETH M		8. STAR NO. 7324		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE WHI		11. AGE [REDACTED]		12. HT. 511		13. WT. 235																																																																																																												
	14. DATE OF APPT. 03-JAN-2005			15. EMPLOYEE NO. [REDACTED]			16. UNIT & BEAT OF ASSIGNMENT 025 2514		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No																																																																																																																
SUBJECT INFORMATION	20. LAST NAME [REDACTED]				21. FIRST NAME [REDACTED]				22. M.I. [REDACTED]		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE WBH		25. D.O.B. [REDACTED]		26. HT. 509		27. WT. 280																																																																																																										
	29. TELEPHONE NO. [REDACTED]				30. WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No																																																																																																																
	33. WHERE WAS MEDICAL TREATMENT OBTAINED?				34. BY WHOM?				35. CONDITION <input type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input checked="" type="checkbox"/> 05 Refused Medical Aid																																																																																																																				
36. CHARGES PLACED <input type="checkbox"/> DNA																		37. CB NO. [REDACTED]		IR NO. <input type="checkbox"/> DNA																																																																																																									
REASON FOR USE OF FORCE (Check all that apply)	38. <input type="checkbox"/> DNA		SUBJECT'S ACTIONS		MEMBER'S RESPONSE		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE																																																																																																														
			DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/>		VERBAL COMMANDS <input checked="" type="checkbox"/>		ESCORT HOLDS <input type="checkbox"/>		WRISTLOCK <input type="checkbox"/>		ARMBAR <input type="checkbox"/>		PRESSURE SENSITIVE AREAS <input type="checkbox"/>		CONTROL INSTRUMENT <input type="checkbox"/>		OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/>		OTHER _____		FLED <input type="checkbox"/>		PULLED AWAY <input checked="" type="checkbox"/>		OTHER <u>USED SON TO DEFEAT AI</u>		IMMINENT THREAT OF BATTERY <input type="checkbox"/>		OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/>		ATTACK WITHOUT WEAPON <input type="checkbox"/>		OTHER _____		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/>		WEAPON <input type="checkbox"/>		OTHER _____																																																																																				
			MEMBER PRESENCE <input checked="" type="checkbox"/>		VERBAL COMMANDS <input checked="" type="checkbox"/>		ESCORT HOLDS <input type="checkbox"/>		WRISTLOCK <input type="checkbox"/>		ARMBAR <input type="checkbox"/>		PRESSURE SENSITIVE AREAS <input type="checkbox"/>		CONTROL INSTRUMENT <input type="checkbox"/>		OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/>		OTHER _____		OPEN HAND STRIKE <input type="checkbox"/>		TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/>		OC CHEMICAL WEAPON <input type="checkbox"/>		CANINE <input type="checkbox"/>		TASER (Probe Discharge) <input type="checkbox"/>		TASER (Contact Stun) <input checked="" type="checkbox"/>		TASER (Laser Targeted) <input type="checkbox"/>		TASER (Spark Displayed) <input type="checkbox"/>		OTHER _____		ELBOW STRIKE <input type="checkbox"/>		CLOSED HAND STRIKE/PUNCH <input type="checkbox"/>		IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/>		OTHER _____		KNEE STRIKE <input type="checkbox"/>		KICKS <input type="checkbox"/>		IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		OTHER _____		FIREARM <input type="checkbox"/>		OTHER _____																																																																				
WEAPON DISCHARGE INCIDENT	39. <input type="checkbox"/> DNA																		40. ADDITIONAL INFORMATION																																																																																																										
	POSITION																		STAR NO.																		UNIT																																																																																								
	41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER																		42. INCIDENT OCCURRED <input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors																		43. LIGHTING CONDITIONS <input checked="" type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial																		44. WEATHER CONDITIONS CLEAR																																																																						
45. MAKE/MANUFACTURER																		46. MODEL																		47. BARREL LENGTH																		48. CALIBER/GAUGE																																																																							
49. TASER DART ID NO.																		50. WEAPON SERIAL No. (Include Letters) ZZX30068A																		51. CHICAGO GUN REG. NO.																		52. IL FIREARM OWNER ID. NO.																		53. HANDGUN CERTIFICATE NO.																																																					
54. SPECIAL WEAPON CERTIFICATE NO.																		55. PROPERTY INVENTORY NO.																		56. TYPE OF AMMUNITION USED																		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER 1																		58. TOTAL NO. OF SHOTS MEMBER FIRED																																																					
59. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)																		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO																		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED																		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)																		63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)																		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD																		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO																	
66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)																		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.																		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN																		69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)																																																																							
CASE INFO.	70. EVENT NO.																		71. R.D. NO.																																																																																																										
	72. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT. & W.C./DIST. OF OCCUR. <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.																																																																																																																												
SIGNATURES	73. REPORTING MEMBER (Print Name) GOLDEN, KENNETH M 24-JUL-2014 19:55:02																		STAR/EMPLOYEE NO. 7324																		SIGNATURE [REDACTED]																																																																																								
	74. REVIEWING SUPERVISOR (Print Name) MC HUGH, SHANE F																		STAR NO. 1077																		SIGNATURE [REDACTED]																		DATE REVIEWED 24-JUL-2014 19:55:56																		TIME																																																				

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM; 2.) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR; 3.) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON.

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING; 1.) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON; 2.) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON; 3.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

Arrestee does not know why he was tased.

76. WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

In R/Lt's opinion, the officer's actions were both reasonable and necessary to place the arrestee into physical custody.

77. WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1070561 OBTAINED

78. WATCH COMMANDER/OCIC (Print Name)

STOPPA, KENNETH A

SIGNATURE

DATE COMPLETED

TIME

24-JUL-2014 20:00:18

79. DISTRIBUTION OF ORIGINAL TRR:

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS.

ATTACHMENTS - PHOTOCOPIES OF:

☐ SUPPLEMENTARY REPORT

☐ I.O.D. REPORT

80. TOTAL TRR's THIS EVENT No.

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

1

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C (REV. 6/30)

ARREST REPORTING

OFFENDER	Name:		Male		
	Res:	Beat: 3100	White Hispanic		
INCIDENT	Empl:		5' 10"		
	DOB:		265 lbs		
	AGE: 29 years		Brown Eyes		
	POB: Unknown		Brown Hair		
	DLN:		Short Hair Style		
	ARMED WITH Unarmed		Medium Complexion		
			US Veteran		
CHARGES	Arrest Date: 24 July 2014 18:15	TRR Completed? No	Total No Arrested: 1	Co-Arrests	Assoc Cases
	Location	Beat: 2511	Dependent Children? Yes	DCFS Ward ? No	
RECOVERED NARCOTICS	Holding Facility: District 025 Male Lockup				
	Resisted Arrest? Yes				
WARRANT	1	Offense As Cited 720 ILCS 5.0/12-3.2-A-2	Domestic Related	Victim	
	2	Offense As Cited 720 ILCS 5.0/31-1-A	Domestic Related	State Of Illinois, Po Golden	
RESISTING/PC OFF/CORR EMP/FRFTR					
Class A - Type M					
NO NARCOTICS RECOVERED					
NO WARRANT IDENTIFIED					

ARREST REPORTING

VICTIM AND COMPLAINANT

Name: [REDACTED] Beat: 3100 Female Injured? No Deceased? No
Res: [REDACTED] Unknown DOB: 23 May 1989 Hospitalized? No
Age: 25 Treated and Released? No
Comments:

VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, Po Golden 7324 Injured? No Deceased? No
DOB: Hospitalized? No
Age: Treated and Released? No
Comments:

Vehicle: VEHICLE IMPOUNDED:
2005 Automobile - Chevrolet - Impala - Hardtop, 4-Door VIN#: [REDACTED]
Color: White (Top) / White (Bottom)
Pound#: [REDACTED]
Disposition: [REDACTED]

Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED] NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

Event no. [REDACTED] In summary: a/os responded to an oemc domestic battery call at stated location. upon arrival a/os met with victim who related that offender [REDACTED] struck her about the face with a closed fist and struck her face against a love seat while grasping her hair. Victim relates that offender left the scene shortly after. a/os gathered the information and left the location to complete a report. shortly after leaving the location a/os were informed per oemc that offender [REDACTED] returned to the residence and was currently in the house. a/os returned to the location and upon approaching the door of the residence heard a large commotion emanating from the apartment. a/os opened the door of the residence and found offender [REDACTED] coming down the stairs with his son in his arms. offender [REDACTED] then slipped on a rug and fell on his back. at this time a/os began to affect an arrest as the offender pulled back his arm to defeat the arrest and tensed his body along with his fists. at this time a/o Golden star 7324 applied the taser (drive stunned). offender [REDACTED] let go of his son and a/os attempted to affect an arrest the second time at which time offender tensed his body and his fists again at which time a/os Golden star 7324 applied the taser (drive stunned) the second time. Offender [REDACTED] was then placed in custody and transported to 025 district for processing. Subject has no investigative alerts or warrants, clear of GIPP & TRAP.

ARREST REPORTING

COURT INFO	BOND INFO
Desired Court Date: 12 August 2014 Branch: 63-2 555 W HARRISON ST - Room 40 Court Sgt Handle? No Initial Court Date: 25 July 2014 Branch: 63-2 555 W HARRISON ST - Room404 Docket #:	BOND INFORMATION NOT AVAILABLE

REPORTING PERSONNEL										
ATTESTING OFFICER: I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.										
Attesting Officer: #7011 SIKORSKI, T [REDACTED] 24 JUL 2014 21:56										
ARRESTING OFFICER(S):										
<table><tr><td>1st Arresting Officer:</td><td>#7011</td><td>SIKORSKI, T</td><td>[REDACTED]</td><td>Beat</td></tr><tr><td>2nd Arresting Officer:</td><td>#7324</td><td>GOLDEN, K M</td><td>[REDACTED]</td><td>2514</td></tr></table>	1st Arresting Officer:	#7011	SIKORSKI, T	[REDACTED]	Beat	2nd Arresting Officer:	#7324	GOLDEN, K M	[REDACTED]	2514
1st Arresting Officer:	#7011	SIKORSKI, T	[REDACTED]	Beat						
2nd Arresting Officer:	#7324	GOLDEN, K M	[REDACTED]	2514						
APPROVING SUPERVISOR:										
Approval of Probable Cause : #577 PLATT, M E [REDACTED] 24 JUL 2014 22:00										

ARREST PROCESSING REPORT

Holding Facility: District 025 Male Lockup
Received in Lockup: 24 July 2014 21:10
Prints Taken: 24 July 2014 22:29
Palmprints Taken: Yes
Photograph Taken: 24 July 2014 22:41
Released from Lockup: 25 July 2014 06:40

Time Last Fed:

Time Called:

Phone#:

Cell #: 8-2

Transport Details : 2PO 2514 24-JUL-2014 18:40

VISUAL CHECK OF ARRESTEE

ARRESTEE QUESTIONNAIRE

Is there obvious pain or injury? No
Is there obvious signs of infection? No
Under the influence of alcohol/drugs? No
Signs of alcohol/drug withdrawal? No
Appears to be despondent? No
Appears to be irrational? No
Carrying medication? No

Presently taking medication? No
(if female)are you pregnant?
First time ever been arrested? No
Attempted suicide/serious harm? No
Serious medical or mental problems? No
Are you receiving treatment? No
Transgender/intersex/gender non-conforming? No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

LOCKUP KEEPER COMMENTS:

25 JUL 2014 01:45 19735 ARCHER, Steven K [REDACTED] 8-6
25 JUL 2014 02:34 19735 ARCHER, Steven K [REDACTED] Cell

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

LOCKUP KEEPER PROCESSING

INTERVIEW LOG

NO INTERVIEWS LOGGED

VISITOR LOG

NO VISITORS LOGGED

ARREST PROCESSING REPORT

MOVEMENT LOG

MOVEMENT LOG INFORMATION NOT AVAILABLE

WC COMMENTS

Watch Commander Comments:

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

PROCESSING PERSONNEL

ARRESTEE PROCESSING PERSONNEL:

Beat

Searched By: #19735 ARCHER, S K
Lockup Keeper: FANTAUZZI, W A
Fingerprinted By: FANTAUZZI, W A

APPROVAL PERSONNEL:

Beat

Final Approval of Charges : #577 PLATT, M E 24 JUL 2014 23:59